

*Section of Dermatology*

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**Multiple Familial Telangiectases.**

By S. E. DORE, M.D.

PATIENT, female, aged 56, for the past fourteen years, has had multiple telangiectases, some of them large macules, with hyperkeratosis of their surface, on the face. She also had them on the tongue and lips, a few on the body, one or two on the hands, and one under a nail. She suffered frequently from nose-bleeding, a symptom noted in other cases of the kind. Her mother suffered from multiple telangiectases, but had, apparently, only a few lesions, which were larger in size. The patient does not know whether other members of the family have been similarly affected. She was treated by electrolysis many years ago, but she faints so readily that the electrolysis had to be stopped. I propose trying CO<sub>2</sub> snow. This is the third case of the kind I have seen. One of the patients (a man) said that the condition had been known in his family for a hundred years. The third patient was a young woman, and no other members of her family appeared to be affected.

Dr. F. PARKES WEBER said that, many years ago, he had published a familial group of the kind.<sup>1</sup> One of the great points of interest was that though the tendency was inborn, the lesions of the skin and mucous membranes manifested themselves or were often first observed at relatively late periods, as in the present case. The nose-bleeding, however, was often noted earlier. The present patient said she had sometimes had slight epistaxis when she was a girl at school; it was a question whether that indicated the time of development of the telangiectatic lesions of the nasal mucous membrane.

**Papular Swellings on Eyelids and Forehead: ? Colloid Milium.**

By J. H. T. DAVIES, M.D.

THIS patient, a lady, aged 45, has had swellings in her eyelids and the skin of her forehead for ten years. They have been multiplying more rapidly lately. She has been and is well otherwise. She states that her father had a "touch of the same thing." She thinks the swellings vary from day to day.

The eruption consists of 150 or so of papules varying up to the size of a hemp seed forming visible elevations on the skin, but so soft as to be scarcely palpable. When the skin is put on the stretch they appear as round or lobulated, opaque white granules lying fairly superficially in the skin. I have made the diagnosis of colloid milium. I have not yet had an opportunity of cutting sections.

Dr. F. PARKES WEBER said he thought this condition was so-called colloid milium. He had seen it in elderly women, but had never been called upon to treat it.

**Mucous Adenomata of Palate: Case for Diagnosis.**

By J. E. M. WIGLEY, M.B.

THE patient, a man, aged 37, shows, at the junction of the hard and soft palate, several whitish papules, each having a red, apparently hæmorrhagic, centre. They are quite hard to the touch, and give rise to no sensation. In front of them, immediately behind the incisor teeth, is a red thickened patch, which is slightly

<sup>1</sup> F. Parkes Weber, "Multiple Hereditary Developmental Angiomata (Telangiectases) of the Skin and Mucous Membranes," *Lancet*, 1907 (ii), 160; also "Developmental Telangiectatic Hæmorrhage and so-called Telangiectasia, familial and non-familial," *Brit. Journ. Child. Dis.*, 1924, xxi, 198.